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	Attorney Docket Nun	nber	08964/00001			
DECLARATION FOR UTILITY OR DESIGN	First Named Inventor		COGEN, Jeffrey M.			
PATENT APPLICATION	COMPLETE IF KNOWN					
(37 CFR 1.63)	Application Number		/			
	Filing Date	herewith				
☐ Declaration ☐ Declaration ☐ Submitted OR Submitted after Initial	Group Art Unit					
with Initial Filing (surcharge Filing (37 CFR 1.16 (e)) required)	Examiner Name					
As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as s I believe I am the original, first and sole inventor (if only on names are listed below) of the subject matter which is claim System and Method for Placing Orde	e name is listed below) or an o ned and for which a patent is s					
the specification of which (Title of is attached hereto OR was filed on (MM/DD/YYYY)	the Invention) as United States	: Applic	cation Number or PCT International			
Application Number and was a I hereby state that I have reviewed and understand the cont amended by any amendment specifically referred to above.	mended on (MM/DD/YYYY) [ents of the above identified spe	ecificat	(if applicable).			

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO			
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		n a supplemental priority data			reto:		
I hereby claim the benefit under	r 35 U.S.C. 119(e) of	any United States provisional	application(s) list	ed below.			
Application Number(s)	Filing D	ate (MM/DD/YYYY)					
60/277,719	03/22/200	11	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.				

Lacknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.





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DECLARATION — Utility or Design Patent Application

													
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Additional	registered	practitioner(s) na	amed on	supplementa	l Registered	Practitions	r Inform	nation she	et PTO	/SB/020	attached here	eto.	
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Name	Grego	ory M. Stone, Esq.											
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Given Name (first and middle [if any])						Family Name or Surname							
Jeffrey M						Coger	1						
Inventor's Signature		John	7	n. (<u>~</u>	_					Date	6/15/01	
Residence: City Flemington State			NJ	Country U.S.					Citizenship	U.S.			
Post Office A	Post Office Address 7 Bonnell Street												
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City		Flemington	State	NJ	ZIP	08822	2		Cou	intry	U.S.		

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto